

Bureau of Health Care Quality & Compliance

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| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION                       |  | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br><b>NVS524HHA</b>                          | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING _____<br>B. WING _____   | (X3) DATE SURVEY<br>COMPLETED<br><br><b>05/28/2009</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>MAXIM HEALTHCARE SERVICES, INC</b> |  | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>3530 E FLAMINGO ROAD SUITE 270<br/>LAS VEGAS, NV 89121</b> |  |  |
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| H 00  | <p><b>INITIAL COMMENTS</b></p> <p>This Statement of Deficiencies was generated as a result of a State Licensure survey conducted at your facility on May 27, 2009 and finalized on May 28, 2009, in accordance with Nevada Administrative Code, Chapter 449, Home Health Agencies.</p> <p>A Plan of Correction (POC) must be submitted. The POC must relate to the care of all patients and prevent such occurrences in the future. The intended completion dates and the mechanism(s) established to assure ongoing compliance must be included.</p> <p>Monitoring visits may be imposed to ensure on-going compliance with regulatory requirements.</p> <p>The census was 47.<br/>Four active patient files were reviewed and four discharged patient files were reviewed. There were no complaints investigated.</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state or local laws.</p> | H 00   |  |  |
| H131<br>SS=F  | <p><b>449.770 Governing Body; Bylaws</b></p> <p>6. The governing body shall adopt bylaws or an acceptable equivalent in accordance with legal requirements. The bylaws must be written, revised as needed, and made available to all members of the governing body, the health division and the advisory group. the terms of the bylaws must include at least the following:</p>   | H131   |  |  |

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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| H131  | <p>Continued From page 1</p> <p>(a) The basis upon which members of the governing body are selected, their terms of office of their duties and responsibilities.</p> <p>(b) A provision specifying to whom responsibilities for the administration and supervision of the program and the evaluation of practices may be delegated, and the methods established by the governing body for holding those persons responsible.</p> <p>(c) A provision specifying the frequency of board meetings and requiring that minutes be taken at each meeting.</p> <p>(d) A provision requiring the establishment of personnel policies.</p> <p>(e) the agency's statements of objectives.</p> <p>This Regulation is not met as evidenced by:<br/>Based on document review of the Governing Body/Bylaws and staff interview, the agency failed to incorporate the provision requiring the establishment of personnel policies.</p> <p>Findings include:</p> <ol style="list-style-type: none"> <li>1. Agency policies lacked a provision indicating the agency would review its medical and personnel policies in accordance with its annual evaluation.</li> <li>2. The Administrator failed to provide documented evidence in which the agency reviewed its medical and personnel policies.</li> </ol> <p>Severity: 2 Scope: 3</p> | H131  |  |                          |  |
| H132<br>SS=C  | <p>449.770 Governing Body; Bylaws</p> <p>7. The governing body shall adopt policies for the agency including policies relating to admissions, care and discharge of patients.</p>   | H132  |  |                          |  |

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| H132  | Continued From page 2<br><br>This Regulation is not met as evidenced by:<br>Based on document review of the Governing<br>Body/Bylaws and staff interview, the agency<br>failed to include policies relating to admissions,<br>care and discharge of patients.<br><br>Findings include:<br><br>1. Agency policies lacked a provision indicating<br>the agency would review its medical and<br>personnel policies in accordance with its annual<br>evaluation.<br><br>2. The Administrator failed to provide<br>documented evidence in which the agency<br>reviewed its medical policies.<br><br>Severity: 1 Scope: 3  | H132  |  |                          |  |
| H133<br>SS=C  | 449.770 Governing Body; Bylaws<br><br>8. The governing body is legally responsible for<br>the appointment of a qualified administrator and<br>the delegation of responsibility and authority.<br>This Regulation is not met as evidenced by:<br>Based on document review and interview, the<br>agency's governing body failed to appoint a<br>qualified administrator based on the agency's<br>Administrator's Job Description/Administrator<br>Position Requirements.<br><br>Findings Include:<br><br>Review of the agency's Administrator Job<br>Description/Essential Job Functions revealed,<br>one must be "Graduate of an accredited school of<br>Nursing, BSN preferred; or Bachelor degree in<br>Business/Marketing/Communications/Provider<br>Relations with experience commensurate with the<br>COP's or state specific requirements". | H133  |  |                          |  |

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| H133  | Continued From page 3<br><br>The Administrator's Job Application did not meet the educational level requirement for the position.<br><br>On 5/27/09 in the afternoon, interview with the Administrator revealed, the Administrator did not meet the educational level requirement for the position per the agency's policy.<br><br>Severity: 1 Scope: 3  | H133   |  |  |
| H134<br>SS=C  | 449.770 Governing Body; Bylaws<br><br>9. The governing body shall ensure that the administrator has sufficient freedom from other responsibilities to permit adequate attention to the direction and management of the agency. This Regulation is not met as evidenced by: Based on document review of the Governing Body/Bylaws and staff interview, the agency failed to indicate that the governing body shall ensure that the administrator has sufficient freedom from other responsibilities to permit adequate attention to the direction and management of the agency.<br><br>Findings include:<br><br>1. Agency policies lacked a provision indicating the agency's governing body shall ensure that the Administrator had sufficient freedom from other responsibilities to permit adequate attention to the direction and management of the agency.<br><br>2. The Administrator failed to provide documented evidence of the above.<br><br>Severity: 1 Scope: 3 | H134   |  |  |

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| H136<br>SS=F  | <p>449.773 Administrator</p> <p>2. The administrator shall represent the governing body in the daily operation of the agency. His responsibilities include:</p> <p>(a) Keeping the governing body fully informed of the conduct of the agency through regularly written reports and by attendance at meetings of the governing body.</p> <p>(b) Employing qualified personnel and arranging for their orientation and continuing education.</p> <p>(c) Developing and implementing an accounting and reporting system that reflects the fiscal experience and financial position of the agency.</p> <p>(d) Negotiating for services provided by contract in accordance with legal requirements and established policies of the agency.</p> <p>(e) Holding periodic meetings to maintain a liaison between the governing body, the advisory groups and the members of the staff.</p> <p>(f) Other duties as may be assigned.</p> <p>This Regulation is not met as evidenced by: Based on record review and interview, the agency's administrator failed to meet the requirements of Nevada Administrative Code 449.785(1-6 and 8-10) in the agency's provider contract and failed to ensure the public could access services the agency advertised and was licensed to provide.</p> <p>Findings include:</p> <p>1. The administrator provided two service contracts for physical and occupational therapists that failed to completely address Nevada regulations.</p> <p>2. The agency did not employ either a speech</p> | H136   |  |  |

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| H136  | Continued From page 5<br><br>therapist or a registered dietitian. Agency promotional materials advertised it offered speech therapy and registered dietitians. The administrator indicated the agency's service contracts included speech therapy and registered dietitians. The agency's service contracts failed to include speech therapy and registered dietitians.<br><br>Severity: 2 Scope: 3   | H136   |  |  |
| H139<br>SS=C  | 449.776 Director of Professional Services<br><br>2. The director of professional services shall:<br>(a) Direct, supervise and coordinate the skilled nursing services and other therapeutic services provided by the agency.<br>(b) Develop and revise written objectives for the care of the patients, policies and procedure manuals.<br>(c) Assist in the development of descriptions of jobs.<br>(d) Assist in the recruitment and selection of personnel.<br>(e) Recommend to the administrator the number and levels of members of the nursing staff.<br>(f) Plan and conduct orientations and continuing education for members of the staff engaged in the care of patients.<br>(g) Evaluate the performance of the nursing staff.<br>(h) Assist in planning and budgeting for the provision of services.<br>(i) Assist in establishing criteria for the admission and discharge of patients.<br>This Regulation is not met as evidenced by:<br>Based on document review and interview, the agency failed to comply with the NAC 449.776 sections c and h. | H139   |  |  |

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| H139  | Continued From page 6<br><br>Findings include:<br><br>On 5/27/08 in the afternoon, record review of the Director of Clinical Services (DOCS) job description and interview with the DOCS revealed, the DOCS did not participate in the development of job descriptions and did not assist in planning and budgeting for the provision of services.<br><br>Severity: 1 Scope: 3  | H139  |  |                          |  |
| H145<br>SS=F  | 449.779 Professional Advisory Group<br><br>6. The member of the advisory group who is a physician shall interpret the established policies to the local medical society and to other physicians.<br>This Regulation is not met as evidenced by:<br>Based on document review and staff interview, the Professional Advisory Group (PAG) did not include a physician who shall interpret the established policies to the local medical society and to other physicians.<br><br>Findings include:<br><br>Interview with the Administrator and the Director of Clinical Services revealed a lack of documented evidence to indicate compliance.<br><br>Severity: 2 Scope: 3 | H145  |  |                          |  |
| H152<br>SS=F  | 449.782 Personnel Policies<br><br>A home health agency shall establish written policies concerning the qualification, responsibilities and conditions of employment for each type of personnel, including licensure if  | H152  |  |                          |  |

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| H152  | <p>Continued From page 7</p> <p>required by law. The written policies must be reviewed as needed and made available to the members of the staff and the advisory groups. The personnel policies must provide for:</p> <p>6. The maintenance of employee records which confirm that personnel policies are followed; This Regulation is not met as evidenced by: NRS 449.176</p> <p>1. Each applicant for a license to operate a facility for intermediate care, facility for skilled nursing or residential facility for groups shall submit to the central repository for Nevada records of criminal history two complete sets of fingerprints for submission to the Federal Bureau of Investigation for its report.</p> <p>2. The central repository for Nevada records of criminal history shall determine whether the applicant has been convicted of a crime listed in paragraph (a) of subsection 1 of NRS 449.188 and immediately inform the administrator of the facility, if any, and the health division of whether the applicant has been convicted of such a crime.</p> <p>NRS 449.179</p> <p>1. Except as otherwise provided in subsection 2, within 10 days after hiring an employee or entering into a contract with an independent contractor, the administrator of, or the person licensed to operate, an agency to provide nursing in the home a facility for intermediate care, a facility for skilled nursing or a residential facility for groups shall: (a) obtain a written statement from the employee or independent contractor stating whether he has been convicted of any crime listed in NRS 449.188; (b) Obtain an oral and written confirmation of the information contained in the written statement obtained pursuant to paragraph (a); (c) Obtain from the employee or independent contractor two sets of fingerprints and a written authorization to forward</p> | H152   |  |  |

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| H152  | Continued From page 8<br><br>the fingerprints to the central repository for Nevada records of criminal history for submission to the Federal Bureau of Investigation for its report; and (d) Submit to the central repository for Nevada records of criminal history the fingerprints obtained pursuant to paragraph (c).<br>2. The administrator of, or the person licensed to operate, an agency to provide nursing in the home, a facility for intermediate care, a facility for skilled nursing or a residential facility for groups is not required to obtain the information described in subsection 1 from an employee or independent contractor who provides proof that an investigation of his criminal history has been conducted by the central repository for Nevada records of criminal history with in the immediately preceding 6 months and the investigation did not indicate that the employee or independent contractor had been convicted of any crime set forth in NRS 449.188.<br>3. The administrator of, or the person licensed to operate, an agency to provide nursing in the home, a facility for intermediate care, a facility for skilled nursing or a residential facility for groups shall ensure that the criminal history of each employee or independent contractor who works at the agency or facility is investigated at least every 5 years. The administrator of person shall:<br>(a) If the agency or facility does not have the fingerprints of the employee or independent contractor on file, obtain two sets of fingerprints from the employee or independent contractor;<br>(b) Obtain written authorization from the employee or independent contractor to forward the fingerprints on file or obtained pursuant to paragraph (a) to the central repository for Nevada records of criminal history for submission to the Federal Bureau of Investigation for its report; and<br>(c) Submit the fingerprints to the central repository for Nevada records of criminal history. | H152  |  |                          |  |

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| H152  | <p>Continued From page 9</p> <p>4. Upon receiving fingerprints submitted pursuant to this section, the central repository for Nevada records of criminal history shall determine whether the employee or independent contractor has been convicted of a crime listed in NRS 449.188 and immediately inform the health division and the administrator of, or the person licensed to operate, the agency or facility at which the person works whether the employee or independent contractor has been convicted of such a crime.</p> <p>5. The central repository for Nevada records of criminal history may impose a fee upon an agency or a facility that submits fingerprints pursuant to this section for the reasonable cost of the investigation. The agency or facility may recover from the employee or independent contractor not more than one-half of the fee imposed by the central repository. If the agency or facility requires the employee or independent contractor to pay for any part of the fee imposed by the central repository, it shall allow the employee or independent contractor to pay the amount through periodic payments.</p> <p>NRS 449.182 Each agency to provide nursing in the home, facility for intermediate care, facility for skilled nursing and residential facility for groups shall maintain accurate records of the information concerning its employees and independent contractors collected pursuant to NRS 449.179, and shall maintain a copy of the fingerprints submitted to the central repository for its report. These records must be made available for inspection by the health division at any reasonable time and copies thereof must be furnished to the health division upon request.</p> <p>NRS 449.185</p> <p>1. Upon receiving information from the central</p> | H152  |  |                          |  |

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| H152  | Continued From page 10<br><br>repository for Nevada records of criminal history pursuant to NRS 449.179, or evidence from any other source, that an employee or independent contractor of an agency to provide nursing in the home, a facility for intermediate care, a facility for skilled nursing or a residential facility for groups has been convicted of a crime listed in paragraph (a) of subsection 1 of NRS 449.188, the administrator of, or the person licensed to operate, the agency or facility shall terminate the employment or contract of that person after allowing him time to correct the information as required pursuant to subsection 2.<br>2. If the employee or independent contractor believes that the information provided by the central repository is incorrect, he may immediately inform the agency or facility. An agency or facility that is so informed shall give the employee or independent contractor a reasonable amount of time of not less than 30 days to correct the information received from the central repository before terminating employment or contract of the person pursuant to subsection 1.<br>3. An agency or facility that has complied with NRS 449.179 may not be held civilly or criminally liable based solely upon the ground that the agency or facility allowed an employee or independent contractor to work;<br>(a) Before it received the information concerning the employee or independent contractor from the central repository;<br>(b) During any period required pursuant to subsection 2 to allow the employee or independent contractor to correct that information;<br>(c) Based on the information received from the central repository, if the information received from the central repository was inaccurate; or<br>(d) Any combination thereof.<br>An agency or facility may be held liable for any | H152  |  |                          |  |

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| NAME OF PROVIDER OR SUPPLIER<br><br><b>MAXIM HEALTHCARE SERVICES, INC</b> |  | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>3530 E FLAMINGO ROAD SUITE 270<br/>LAS VEGAS, NV 89121</b> |  |  |
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| H152  | <p>Continued From page 11</p> <p>other conduct determined to be negligent or unlawful.</p> <p>NRS 449.188</p> <p>1. In addition to the grounds listed in NRS 449.160, the health division may deny a license to operate a facility for intermediate care, facility for skilled nursing or residential facility for groups to an applicant or may suspend or revoke the license of a licensee to operate such a facility if:</p> <p>(a) The applicant or licensee has been convicted of:</p> <p>(1) Murder, voluntary manslaughter or mayhem;</p> <p>(2) Assault with intent to kill or to commit sexual assault or mayhem;</p> <p>(3) Sexual assault, statutory sexual seduction, incest, lewdness, indecent exposure or any other sexually related crime;</p> <p>(4) Abuse or neglect of a child or contributory delinquency;</p> <p>(5) A violation of any federal or state law regulating the possession, distribution or use of any controlled substance or any dangerous drug as defined in chapter 454 of NRS, within the past 7 years;</p> <p>(6) A violation of any provision of NRS 200.50955 or 200.5099;</p> <p>(7) Any offense involving fraud, theft, embezzlement, burglary, robbery, fraudulent conversion or misappropriation of property, within the preceding 7 years; or</p> <p>(8) Any other felony involving the use of a firearm or other deadly weapon, within the immediately preceding 7 years; or</p> <p>(b) The licensee has continued to employ a person who has been convicted of a crime listed in paragraph (a).</p> <p>2. In addition to the grounds listed in NRS 449.160, the health division may deny a license to operate an agency to provide nursing in the home</p> | H152   |  |  |

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| H152  | <p>Continued From page 12</p> <p>to an applicant or may suspend or revoke the license of a licensee to operate such an agency if the licensee has continued to employ a person who has been convicted of a crime listed in paragraph (a) of subsection 1.</p> <p>Sec. 10. NAC 441A.375 is hereby amended to read as follows:<br/>441A.375 1. A case having tuberculosis or suspected case considered to have tuberculosis in a medical facility or a facility for the dependent must be managed in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.<br/>2. A medical facility, a facility for the dependent or a home for individual residential care shall maintain surveillance of employees of the facility or home for tuberculosis and tuberculosis infection. The surveillance of employees must be conducted in accordance with the recommendations of the Centers for Disease Control and Prevention for preventing the transmission of tuberculosis in facilities providing health care set forth in the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.<br/>3. Before initial employment, a person employed in a medical facility, a facility for the dependent or a home for individual residential care shall have a:<br/>(a) Physical examination or certification from a licensed physician that the person is in a state of good health, is free from active tuberculosis and any other communicable disease in a contagious stage; and<br/>(b) Tuberculosis screening test within the preceding 12 months, including persons with a</p> | H152  |  |                          |  |

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| H152  | <p>Continued From page 13</p> <p>history of bacillus Calmette-Guerin (BCG) vaccination.</p> <p>If the employee has only completed the first step of a 2-step Mantoux tuberculin skin test within the preceding 12 months, then the second step of the 2-step Mantoux tuberculin skin test or other single-step tuberculosis screening test must be administered. A single annual tuberculosis screening test must be administered thereafter, unless the medical director of the facility or his designee or another licensed physician determines that the risk of exposure is appropriate for a lesser frequency of testing and documents that determination. The risk of exposure and corresponding frequency of examination must be determined by following the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.</p> <p>4. An employee with a documented history of a positive tuberculosis screening test is exempt from screening with skin tests or chest radiographs unless he develops symptoms suggestive of tuberculosis.</p> <p>5. A person who demonstrates a positive tuberculosis screening test administered pursuant to subsection 3 shall submit to a chest radiograph and medical evaluation for active tuberculosis.</p> <p>6. Counseling and preventive treatment must be offered to a person with a positive tuberculosis screening test in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (g) of subsection 1 of NAC 441A.200.</p> <p>7. A medical facility shall maintain surveillance of employees for the development of pulmonary symptoms. A person with a history of tuberculosis or a positive tuberculosis screening test shall report promptly to the infection control</p> | H152  |  |                          |  |

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| H152  | <p>Continued From page 14</p> <p>specialist, if any, or to the director or other person in charge of the medical facility if the medical facility has not designated an infection control specialist, when any pulmonary symptoms develop. If symptoms of tuberculosis are present, the employee shall be evaluated for tuberculosis.</p> <p>Based on document review and staff interview, the agency failed to comply with the NAC 441A.375, NRS 449.179 (3) and/or personnel policies for 4 of 16 employees.</p> <p>Findings include:</p> <p>A. Record review of the Administrator's job application revealed, the Administrator did not meet the agency's position requirements for the Administrator position.</p> <p>On 5/28/09, interview with the Administrator confirmed the agency failed to follow the agency's requirement for the position.</p> <p>B. Employee #5 was hired on 11/9/07. Employee # 5's 2nd set of fingerprints were rejected by the Nevada Repository Agency.</p> <p>On 5/28/09, the Personnel Background Check Audit sheets from Human Resources did not include Employee #5.</p> <p>The agency lacked documented evidence in which a follow up was made with the Nevada Repository Agency regarding Employee #5's 2nd set of fingerprint rejection.</p> <p>C. Employee #13 was hired on 5/22/09. Employee #13's file revealed lacked of documented evidence of a completed background check, copy of the professional</p> | H152   |  |  |

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| H152  | Continued From page 15<br><br>licensure and the 2 step tuberculosis screening upon hire.<br><br>D. Employee #15 was hired on 4/1/09. Employee #15's file revealed lacked of documented evidence of the annual tuberculosis screening for 2008.<br><br>Severity: 2 Scope: 3  | H152  |  |                          |  |
| H155<br>SS=F  | 449.785 Contracts for Home Health Services<br><br>If a home health agency provides home health services under a contract with another agency, person or nonprofit agency, it must require that such services be furnished in accordance with the terms of the written contract. The contract must:<br>1. Provide for retention by the primary agency of responsibility for and control of the services.<br>This Regulation is not met as evidenced by:<br>Based on record review and administrator interview, the agency's service contracts failed to provide for retention by the primary agency of responsibility for and control of the services.<br><br>Findings include:<br>1. The administrator provided two service contracts on 5/27/09 and 5/28/09.<br>2. The contracts failed to indicate the primary agency retained control of services.<br><br>Severity: 2 Scope: 3 | H155  |  |                          |  |
| H156<br>SS=F  | 449.785 Contracts for Home Health Services<br><br>If a home health agency provides home health  | H156  |  |                          |  |

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| H156  | Continued From page 16<br><br>services under a contract with another agency, person or nonprofit agency, it must require that such services be furnished in accordance with the terms of the written contract. The contract must:<br><br>2. Designate the services which are to be provided, the setting and the geographical area served. Services provided must be within the scope and limitations set forth in the plan of treatment and may not be altered in type, amount, frequency or duration, except in the case of adverse reaction.<br><br>This Regulation is not met as evidenced by:<br>Based on record review and administrator interview, the agency's service contracts failed to include advertised services the agency could otherwise not provide and failed to address the scope and limitations of the agency's services.<br><br>Findings include:<br><br>1. The agency did not employ either a speech therapist or a registered dietitian. Agency promotional materials advertised it offered speech therapy and registered dietitians. The administrator indicated the agency's service contract included speech therapy and registered dietitians. The agency's service contracts failed to include speech therapy and registered dietitians.<br><br>2. The agency's contracts failed to address the scope and limitations of its services.<br><br>Severity: 2 Scope: 3 | H156  |  |                          |  |
| H157<br>SS=F  | 449.785 Contracts for Home Health Services<br><br>If a home health agency provides home health services under a contract with another agency, person or nonprofit agency, it must require that   | H157  |  |                          |  |

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| H157  | Continued From page 17<br><br>such services be furnished in accordance with the terms of the written contract. The contract must:<br>3. Describe how the contracted personnel are to be supervised.<br>This Regulation is not met as evidenced by:<br>Based on record review and administrator interview, the agency's service contracts failed to describe how the agency would supervise contracted personnel.<br><br>Findings include:<br><br>1. The administrator provided two service contracts on 5/27/09 and 5/28/09.<br><br>2. The contracts failed to indicate how the agency would supervise contracted personnel.<br><br>Severity: 2 Scope: 3         | H157  |  |                          |  |
| H158<br>SS=F  | 449.785 Contracts for Home Health Services<br><br>If a home health agency provides home health services under a contract with another agency, person or nonprofit agency, it must require that such services be furnished in accordance with the terms of the written contract. The contract must:<br>4. Describe how services are coordinated with the primary agency.<br>This Regulation is not met as evidenced by:<br>Based on record review and administrator interview, the agency's service contracts failed to describe how services were coordinated with the primary agency.<br><br>Findings include:<br><br>1. The administrator provided two service | H158  |  |                          |  |

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| H158  | Continued From page 18<br><br>contracts on 5/27/09 and 5/28/09.<br><br>2. The contracts failed to describe how services<br>were coordinated with the primary agency.<br><br>Severity: 2 Scope: 3  | H158   |  |  |
| H159<br>SS=F  | 449.785 Contracts for Home Health Services<br><br>If a home health agency provides home health<br>services under a contract with another agency,<br>person or nonprofit agency, it must require that<br>such services be furnished in accordance with<br>the terms of the written contract. The contract<br>must:<br>5. Provide for the reporting of clinical notes and<br>observations by contracted personnel for<br>inclusion in the records of the primary home<br>health agency to facilitate planning and evaluating<br>patient care and to document the care given.<br>Periodic progress notes by appropriate members<br>of the staff must be submitted at least every 14<br>days and more often if warranted by the patient's<br>condition.<br>This Regulation is not met as evidenced by:<br>Based on record review and administrator<br>interview, the agency's contracts failed to indicate<br>a 14 day deadline for clinical staff to submit<br>notes.<br><br>Findings include:<br><br>1. The administrator provided two service<br>contracts on 5/27/09 and 5/28/09.<br><br>2. The contracts failed to indicate a 14 day<br>deadline for clinical staff to submit notes.<br><br>Severity: 2 Scope: 3 | H159   |  |  |

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| H160  | Continued From page 19   | H160   |  |  |
| H160<br>SS=F  | <p>449.785 Contracts for Home Health Services</p> <p>If a home health agency provides home health services under a contract with another agency, person or nonprofit agency, it must require that such services be furnished in accordance with the terms of the written contract. The contract must:</p> <p>6. Specify the method of determining charges and reimbursement by the primary agency for specific services provided under contract. Only the primary agency may bill for or collect for services.</p> <p>This Regulation is not met as evidenced by:<br/>Based on record review and administrator interview, the agency's service contracts failed to indicate only the primary agency could bill for services.</p> <p>Findings include:</p> <p>1. The administrator provided two service contracts on 5/27/09 and 5/28/09.</p> <p>2. The contracts failed to indicate only the primary agency could bill for services.</p> <p>Severity: 2 Scope: 3</p> | H160   |  |  |
| H162<br>SS=F  | <p>449.785 Contracts for Home Health Services</p> <p>If a home health agency provides home health services under a contract with another agency, person or nonprofit agency, it must require that such services be furnished in accordance with the terms of the written contract. The contract must:</p> <p>8. Assure that personnel and services contracted for, meet the requirements specified in NAC</p>  | H162   |  |  |

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| H162  | Continued From page 20<br><br>449.749 to 449.800, inclusive, for home health agency personnel and services, including licensure, personnel qualifications, medical examination, functions, supervision, orientation, inservice education and case conferences. This Regulation is not met as evidenced by: Based on record review and administrator interview, the agency's service contracts failed to assure contracted personnel and services met requirements under Nevada Administrative Code (NAC) 449.749 to 449.800 inclusive.<br><br>Findings include:<br><br>1. The administrator provided two service contracts on 5/27/09 and 5/28/09.<br><br>2. The contracts failed to completely address the above referenced details of NAC 449.749 to 449.800.<br><br>Severity: 2 Scope: 3 | H162  |  |                          |  |
| H163<br>SS=F  | 449.785 Contracts for Home Health Services<br><br>If a home health agency provides home health services under a contract with another agency, person or nonprofit agency, it must require that such services be furnished in accordance with the terms of the written contract. The contract must:<br><br>9. Provide for the acceptance of patients for home health service only by the primary home health agency. Patients may not be admitted for home health service by any person without an appropriate review of the case and acceptance of the patient by the agency.<br>This Regulation is not met as evidenced by: Based on record review and administrator interview, the agency's service contracts failed to   | H163  |  |                          |  |

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| H163  | Continued From page 21<br><br>indicate the primary agency would only admit<br>referred patients with an appropriate case review.<br><br>Findings include:<br><br>1. The administrator provided two service<br>contracts on 5/27/09 and 5/28/09.<br><br>2. The contracts failed to indicate the primary<br>agency would only admit referred patients with an<br>appropriate case review.<br><br>Severity: 2 Scope: 3   | H163  |  |                          |  |
| H164<br>SS=F  | 449.785 Contracts for Home Health Services<br><br>If a home health agency provides home health<br>services under a contract with another agency,<br>person or nonprofit agency, it must require that<br>such services be furnished in accordance with<br>the terms of the written contract. The contract<br>must:<br>10. Assure that personnel and services<br>contracted for will provide treatment to referred<br>patients without regard to race, creed or national<br>origin.<br>This Regulation is not met as evidenced by:<br>Based on record review and administrator<br>interview, the agency's service contracts failed to<br>assure contracted personnel and services would<br>provide treatment to referred patients without<br>regard to race, creed or national origin.<br><br>Findings include:<br><br>1. The administrator provided two service<br>contracts on 5/27/09 and 5/28/09.<br><br>2. The contracts failed to assure contracted<br>personnel and services would provide treatment | H164  |  |                          |  |

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| H164  | Continued From page 22<br><br>to referred patients without regard to race, creed<br>or national origin.<br><br>Severity: 2 Scope: 3  | H164   |  |  |
| H166<br>SS=C  | 449.788 Services to Patients<br><br>1. If needed patient services are not available<br>within the agency, the agency must assist in<br>directing the patient to other community<br>resources.<br>This Regulation is not met as evidenced by:<br>Based on record review and<br>administrator/director of nursing interviews, the<br>agency failed to provide a policy statement<br>directing patients to other resources if the agency<br>could not provide a needed service.<br><br>Findings include:<br><br>The above missing policy was discussed with the<br>Administrator and Director of Nursing, and they<br>failed to provide it.<br><br>Severity: 1 Scope: 3 | H166   |  |  |
| H169<br>SS=C  | 449.791 Duties of Personnel<br><br>1. A registered nurse shall:<br>(a) Provide nursing guidance and care to<br>patients at home.<br>(b) Evaluate the home for its suitability for the<br>patient's care.<br>(c) Teach the patient and those in the home<br>who nurse him how his care is to be given.<br>(d) Supervise and evaluate the patient's care<br>on a continuing basis.<br>(e) Provide necessary professional nursing<br>care.  | H169   |  |  |

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| H169  | Continued From page 23<br><br>This Regulation is not met as evidenced by:<br>Based on document review and staff interview,<br>the agency failed to indicate registered nurses'<br>duties included home evaluation and patient and<br>family teaching.<br><br>Findings include:<br><br>On 5/27/09 in the afternoon, the Director of<br>Clinical Services failed to provide documented<br>evidence which indicated that registered nurses<br>duties included home evaluation and teaching.<br><br>Severity: 1 Scope: 3   | H169  |  |                          |  |
| H174<br>SS=C  | 449.791 Duties of Personnel<br><br>6. The occupational therapist shall:<br>(a) Assist the physician in his evaluation of<br>the patient's level of function and ability to<br>perform activities of daily living.<br>(b) help to develop and implement the<br>patient's care plan.<br>(c) Instruct members of the health care team<br>and family who participate in the patient's<br>occupational therapy.<br>This Regulation is not met as evidenced by:<br>Based on document review and staff interview,<br>the agency failed to indicate occupational<br>therapists' duties included patient and family<br>teaching.<br><br>Findings include:<br><br>On 5/27/09 in the afternoon, the Director of<br>Clinical Services failed to provide documented<br>evidence that occupational therapists duties<br>included teaching. | H174  |  |                          |  |

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| H174  | Continued From page 24<br><br>Severity: 1 Scope: 3  | H174   |  |  |
| H176<br>SS=F  | <p>449.793 Evaluation by Governing Body</p> <p>2. A committee shall review all contracts and charters held by the agency to ascertain that:</p> <p>(a) Existing contracts are legal and up to date.</p> <p>(b) The existing contracts meet the needs of all parties involved.</p> <p>This Regulation is not met as evidenced by:<br/>Based on record review and administrator interview, the agency failed to review all contracts annually to ascertain that existing contracts were legal and up to date and met the needs of all parties involved.</p> <p>Findings include:</p> <p>1. On 5/27/09, the administrator provided a service contract that expired on 7/20/08.</p> <p>2. On 5/28/09, the administrator provided a second service contract for physical and occupational therapists that failed to completely address the requirements of Nevada Administrative Code 449.785(1-6 and 8-10) in the agency's provider contract and failed to ensure the public could access services the agency advertised and was licensed to provide.</p> <p>3. The agency did not employ either a speech therapist or a registered dietitian. Agency promotional materials advertised it offered speech therapy and registered dietitians. The administrator indicated the agency's service contract included speech therapy and registered dietitians. The agency's service contracts failed to include speech therapy and registered dietitians.</p> | H176   |  |  |

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| H176  | Continued From page 25<br><br>Severity: 2 Scope: 3  | H176   |  |  |
| H177<br>SS=C  | <p>449.793 Evaluation by Governing Body</p> <p>3. A committee shall review the management and office procedures of the agency to ascertain that:</p> <p>(a) The agency is being operated in the most effective and economical means while still giving quality service.</p> <p>(b) All office procedures are up to date, filing is correctly done and bookkeeping is meeting accepted accounting procedures and is current.</p> <p>(c) Equipment is in good repair an adequately meets operational needs.</p> <p>This Regulation is not met as evidenced by:<br/>Based on record review and administrator interview, the agency failed to review management and office procedures in accordance with its annual evaluation.</p> <p>Findings include:</p> <p>1. Agency policies lacked a provision indicating the agency would review its management and office procedures to ascertain:</p> <p>(a) The agency was being operated in the most effective and economical means while still giving quality service.</p> <p>(b) All office procedures were up to date, filing was correctly done and bookkeeping met current accepted accounting procedures.</p> <p>(c) Equipment was in good repair an adequately met operational needs.</p> <p>2. The administrator failed to provide documented evidence the agency reviewed its management and office procedures annually.</p> <p>Severity: 1 Scope: 3</p> | H177   |  |  |

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| H178  | Continued From page 26  | H178  |  |                          |  |
| H178<br>SS=C  | <p>449.793 Evaluation by Governing Body</p> <p>4. The committee shall submit a report to the governing body with any recommendations for changes and pertinent observations as it deems necessary.</p> <p>This Regulation is not met as evidenced by:<br/>Based on record review and administrator interview, the agency failed to submit a report to the governing body with any recommendations for changes and pertinent observations it deemed necessary regarding its annual evaluation.</p> <p>Findings include:</p> <p>1. Agency policies lacked a provision indicating the agency would submit a report to the governing body with any recommendations for changes and pertinent observations it deemed necessary regarding its annual evaluation.</p> <p>2. The administrator failed to provide documented evidence the agency submitted such a report to its governing body annually.</p> <p>Severity: 1 Scope: 3</p> | H178  |  |                          |  |
| H179<br>SS=C  | <p>449.793 Evaluation by Governing Body</p> <p>5. A committee shall review the medical and personnel policies to ensure that the policies are being fulfilled and necessary changes or additions are effected.</p> <p>This Regulation is not met as evidenced by:<br/>Based on record review and administrator interview, the agency failed to review its medical and personnel policies in accordance with its annual evaluation.</p>  | H179  |  |                          |  |

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| H179  | Continued From page 27<br><br>Findings include:<br><br>1. Agency policies lacked a provision indicating the agency would review its medical and personnel policies in accordance with its annual evaluation.<br><br>2. The administrator failed to provide documented evidence the agency reviewed its medical and personnel policies annually.<br><br>Severity: 1 Scope: 3  | H179  |  |                          |  |
| H180<br>SS=C  | 449.793 Evaluation by Governing Body<br><br>6. The governing body shall provide for a quarterly review of 10 percent of the records of patients who have received services during the preceding 3 months in each services area. The members of the committee must include an administrative representative, a physician, a registered nurse and a clerk or librarian who keeps records. The clerk or librarian shall review the clinical records to ensure that they are complete, that all forms are properly filled out and that documentation complies with good medical practices. The committee shall determine whether the services have been provided to the patients in an adequate and appropriate manner by all levels of service. The committee shall record any deficiencies and make necessary recommendations to the administrator. If the branch offices are small, two or more offices may establish one committee to review cases from each area. Each subunit agency must establish a committee to review cases within its area. Minutes of the committee's meetings must be documented and available for review.<br>This Regulation is not met as evidenced by:<br>Based on record review and administrator | H180  |  |                          |  |

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| H180  | Continued From page 28<br><br>interview, the agency's governing body failed to provide for a quarterly review of 10 percent of the records of patients who received services during the preceding 3 months in each service area.<br><br>Findings include:<br><br>1. Agency policies lacked a provision indicating the agency's governing body provided a quarterly review of 10 percent of the records of patients who received services during the preceding 3 months in each service area.<br><br>2. The administrator failed to provide documented evidence the agency's governing body provided a quarterly review of 10 percent of the records of patients who received services during the preceding 3 months in each service area.<br><br>Severity: 1 Scope: 3 | H180  |  |  |  |
| H184<br>SS=B  | 449.797 Contents of Clinical Records<br><br>Clinical records must contain:<br>1. The name, address and telephone number of the person who will be notified in an emergency involving the patient.<br>This Regulation is not met as evidenced by:<br>Based on record review and interview, the agency failed to provide emergency contact information in its clinical records for 3 of 8 patients (Patient #1, #2, and #6).<br><br>Findings include:<br><br>1. The Director of Nursing indicated the agency did not have emergency contact information for every patient.<br><br>2. The Director of Nursing printed client   | H184  |  |  |  |

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| H184  | Continued From page 29<br><br>information reports indicating some patients<br>lacked emergency contact information. The<br>respective patient files lacked emergency contact<br>information.<br><br>Severity: 1 Scope: 2   | H184   |  |  |
| H187<br>SS=F  | 449.797 Contents of Clinical Records<br><br>Clinical records must contain:<br>4. A plan for patient care which includes:<br>(a) Objectives and approaches for providing<br>services.<br>(b) Diagnoses of all medical conditions<br>relevant to a plan of treatment.<br>(c) Physical traits pertinent to the plan for<br>care,<br>(d) Nursing services required and the level of<br>care and frequency of visits, special care which is<br>required, such as dressing and catheter changes,<br>and specific observations to be brought to the<br>physician's attention.<br>(e) Requirements of therapy, such as<br>physical, speech, occupational or inhalation<br>therapy with specific instructions for each.<br>(f) Requirements of activity, such as the<br>degree allowed and any assistance required.<br>(g) Medical appliances needed, such as<br>crutches, walkers, braces or equipment for<br>respiratory care.<br>(h) Nutritional needs.<br>(i) Medical supplies needed, such as<br>dressings or irrigation sets.<br>(j) The degree of participation of the family in<br>the care.<br>This Regulation is not met as evidenced by:<br>Based on record review and interview, the agency<br>failed to provide a policy statement indicating its<br>plans of care would include nursing services<br>required, the level of care, frequency of visits, and | H187   |  |  |

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| NAME OF PROVIDER OR SUPPLIER<br><br><b>MAXIM HEALTHCARE SERVICES, INC</b> |  |   | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>3530 E FLAMINGO ROAD SUITE 270<br/>LAS VEGAS, NV 89121</b>                   |                          |  |
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| H187  | Continued From page 30<br><br>special care required.<br><br>Findings include:<br><br>1. Agency policies lacked a provision indicating<br>its plans of care would include nursing services<br>required, the level of care, frequency of visits, and<br>special care required.<br><br>2. The Administrator and Director of Nursing<br>failed to provide documented evidence of policies<br>indicating the agency's plans of care would<br>include nursing services required, the level of<br>care, frequency of visits, and special care<br>required.<br><br>Severity: 2 Scope: 3  | H187  |  |                          |  |
| H195<br>SS=C  | 449.800 Medical Orders<br><br>2. Initial medical orders, renewals and changes of<br>orders for skilled nursing and other therapeutic<br>services submitted by telephone must be<br>recorded before they are carried out All medical<br>orders must bear the signature of the physician<br>who initiated the order within 20 working days<br>after receipt of the oral order.<br>This Regulation is not met as evidenced by:<br>Based on record review, the agency failed to<br>ensure physicians signed medical orders within<br>20 working days for 3 of 8 patients (Patient #6,<br>#7, and #8).<br><br>Findings include:<br><br>1. Two plans of care failed to meet Nevada<br>Administrative Code 449.800(2) for Patient #6.<br><br>2. Two plans of care failed to meet Nevada<br>Administrative Code 449.800(2) for Patient #7. | H195  |  |                          |  |

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

Bureau of Health Care Quality & Compliance

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| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION                       |   | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br><b>NVS524HHA</b>                          | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING _____<br>B. WING _____   | (X3) DATE SURVEY<br>COMPLETED<br><br><b>05/28/2009</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>MAXIM HEALTHCARE SERVICES, INC</b> |   | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>3530 E FLAMINGO ROAD SUITE 270<br/>LAS VEGAS, NV 89121</b> |  |  |
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| H195  | Continued From page 31<br><br>3. On 1/16/09, two supplementary physician's orders failed to meet Nevada Administrative Code 449.800(2) for Patient #8.<br><br>Severity: 1 Scope: 2  | H195   |  |  |
| H197<br>SS=C  | 449.800 Medical Orders<br><br>5. The agency must have an established policy regarding the administration of injectable narcotics and other drugs subject to the drug abuse law. If the policy allows the administration of injectable narcotics and other dangerous drugs subject to drug abuse law, they must be prescribed according to state regulations. This Regulation is not met as evidenced by: Based on record review, the agency failed to address state regulations within its narcotics/dangerous drugs policy.<br><br>Findings include:<br><br>The agency's "controlled substance record" policy failed to indicate whether controlled substances and other dangerous drugs were prescribed according to state regulations.<br><br>Severity: 1 Scope: 3 | H197   |  |  |
| H200<br>SS=F  | 449.800 Medical Orders<br><br>8. New orders are required when there is a change in orders, a change of physician or following hospitalization. This Regulation is not met as evidenced by: Based on record review and interview, the agency failed to obtain new orders to address plan of care changes for 4 of 8 patients (Patient #3, #4,  | H200   |  |  |

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| H200  | <p>Continued From page 32</p> <p>#7 and #8).</p> <p>Findings include:</p> <ol style="list-style-type: none"> <li>1. The agency failed to provide Patient #3 with 10 hours of ordered skilled nursing visits 6 of 7 weeks between 4/5/09 and 5/23/09. The Director of Nursing indicated the agency did not admit cases unless it could staff them, but she indicated the agency had difficulty staffing this particular case. The patient's file indicated the agency communicated with the patient's mother about difficulty staffing the case; the file lacked orders for reduced visit time for the weeks when the agency failed to make visits.</li> <li>2. Patient #4 received two skilled nursing visits when the physician ordered one for the first care week of the period beginning 2/10/09. The file lacked an order for the additional visit.</li> <li>3. The agency failed to provide Patient #7 with ordered visits on 3/28, 4/26, 5/02, and 5/03. The Director of Nursing checked and indicated the agency lacked documented evidence of the aforementioned ordered visits. The file lacked orders nullifying the aforementioned visits.</li> <li>4. The agency failed to provide Patient #8 with four ordered visits weekly for every care week between 3/1/09 and 5/23/09. The file lacked orders reducing the aforementioned visits.</li> </ol> <p>Severity: 2 Scope: 3</p> | H200  |  |                          |  |

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